

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	E-H		08-102-01
O.I.P.E. CLASSIFIER		43	8/8/01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	SOB	1091	10-12-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date		
Final	Original	1/3/01	10/10/01
1	✓	/	/
2	✓	/	/
3	✓	/	/
4	✓	/	/
5	✓	/	/
6	✓	/	/
7	✓	/	/
8	✓	/	/
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10	✓	/	/
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12	✓	/	/
13	✓	/	/
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38	✓	/	/
39	✓	/	/
40	✓	/	/
41	✓	/	/
42	✓	/	/
43	✓	/	/
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Claim	Date		
Final	Original		
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Claim	Date		
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If more than 150 claims or 10 actions
staple additional sheet here

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 C-100
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 10/19/01